

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

PRESQIBER, LLC,

Plaintiff(s)

v.

ADVANCED DATA SYSTEMS CORPORATION,

Defendant(s)

Civil Action No. 6:14-cv-859

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* ADVANCED DATA SYSTEMS CORPORATION
c/o The Company Corporation
2711 Centerville Road, Suite 400
Wilmington, DE 19808

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Craig Tadlock
TADLOCK LAW FIRM PLLC
2701 Dallas Parkway, Suite 360
Plano, TX 75093
Tel: 903-730-6789
Email: craig@tadlocklawfirm.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 11/18/14



CLERK OF COURT

David Malone

Signature of Clerk or Deputy Clerk

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Civil Action No. 6:14-cv-859

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* ADVANCED DATA SYSTEMS CORPORATION
 was received by me on *(date)* 11/21/2014 .

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____ ; or

☐ I returned the summons unexecuted because _____ ; or

☒ Other *(specify)*: Delivered to its' Registered Agent, The Company Corporation, by Certified Mail, Return
 Receipt Requested, at 2711 Centerville Road, Suite 400, Wilmington, DE 19808, on
 December 1, 2014. PS Form 3811 signed for by Authorized Agent, William Lilly, is attached
 to this proof.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: 12/18/2014

Dwight D. Mullen
Server's signature

Dwight D. Mullen-Texas Process Server-SCH912, Exp 07/31/17
Printed name and title

5470 LBJ Freeway, Suite 100
Dallas, TX 75240
Server's address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <i>William Lally</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>ADVANCED DATA SYSTEMS CORPORATION C/O THE COMPANY CORPORATION</p> <p>2711 CENTERVILLE ROAD, SUITE 400 WILMINGTON DE 19808</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article (Transit)</p> <p>7013 1710 0000 5001 8611</p>		<p>325-0502</p>	
PS Form 3811, July 2013		Domestic Return Receipt	